The Mobile Rehabilitation Team

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The Ottawa Hospital Rehabilitation Centre
What is a Mobile Rehabilitation Team

• The TOHRC Mobile Rehab Team (MRT) is based on a model from Sydney, Australia

• Staff at TOHRC wanted to see if we could delay or arrest the problems associated with deconditioning, and decrease LOS in rehabilitation

• We developed a team to go into acute care and start specialized rehabilitation early

• The MRT started seeing patients in September, 2013. We are very happy with the results so far!
Role of the Mobile Rehabilitation Team

- Mobile Rehabilitation (MRT) takes the principles and treatment of Specialized Rehab to the patient’s bedside in acute care.

- Patients that the MRT sees have been in acute care on average 87 days and are very deconditioned.

- We see patients who are on wait lists for Specialized Rehab, but may be too ill for transfer.

- MRT sees patients who have polytraumas, critical illness neuromyopathy, spinal cord injuries and acquired brain injuries.

- MRT sees patients at the General, Civic and Heart Institute.
Criteria

• Should have an inpatient LOS > 3 days
• Must have an impairment with identifiable realistic goals
• Must be medically stable and able to tolerate up to 60 minutes of therapy daily or every second day
• Must be alert, oriented and able to retain new information, and willing to participate in rehab
  • The patient must be accepted onto a TOHRC waitlist
Who do we see?

Diagnosis of Patients

Number of patients

Diagnosis

- Deconditioning
- Cardiac Transplant
- Spinal Cord Injury
- Polytrauma
- Morbid Obesity
- Other Neuro
- Other MSK
- Acquired Brain Injury
# Team Members

<table>
<thead>
<tr>
<th>Discipline</th>
<th>Full Time Equivalent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physiotherapy</td>
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</tr>
<tr>
<td>Occupational Therapy</td>
<td>0.8</td>
</tr>
<tr>
<td>RN</td>
<td>0.6</td>
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<tr>
<td>Psychologist</td>
<td>As needed</td>
</tr>
<tr>
<td>Social Worker</td>
<td>As needed</td>
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Results!

• MRT has **decreased LOS** in the pilot group of patients by an average of **5.6 days**! (compared to a similar co-hort of patients who have not been treated by MRT)

• Patients come to Rehab prepared for treatment and aware of what to expect, and ready to work

• Assessments are done by MRT therapists, therefore there is no need for TOHRC therapists to repeat them

• Patients rave about this service! It lets them see the end of a very long tunnel. Eighty percent of these patients have given the service an “excellent” rating.
Questions?

Members: Sherry Daigle, Clinical Manager; Josie Marino, Psychologist; Yvon Boudrias, PT; Tina Kuznik, OT, Debbie Shalla, RN
Absent: Randi Lebovitch, Social Worker and Sue Geis, PT